



Provider Communication

Subject: 835 Transaction Claim Payment (CLP) and Claim Adjustment (CAS) field descriptions	Priority: High
Date: November 26, 2003	Message ID: ACSBNR-112603-1

Dear Provider:

This document is intended to assist providers in understanding the use of the Claim Payment and Claim Adjustment segments of the 835 transaction. No actual payments accompany the 835 transaction. The 835 is intended to demonstrate the manner in which Medicaid adjudicated the claim, and explain the differences between the charged amount and paid amount.

The 835 transaction does not support detailed information on payors other than Medicaid. For crossover claims, this will mean a difference between the pre-HIPAA RA, which showed both Medicare and Medicaid payment information, and the 835 transaction. The 835 transaction will reflect the Medicare Paid Amount in the CAS segment, with an adjustment reason code of 23.

HIPAA FIELD	HIPAA DESCRIPTION	MHN DESCRIPTION
CLP03	TOTAL CLAIM CHARGE AMOUNT	Sum of the claims billed charges.
CLP04	CLAIM PAYMENT AMOUNT	The final reimbursement amount of the claim. Computed as calculated allowed charge plus/minus all base rate changes (including State Share Withholding).
CLP05	PATIENT RESPONSIBILITY AMOUNT	This field is made up of the addition of FOUR elements:- Co-Pay, Member Liability Reduction, Cost Share Reduction & Spend-Down Processing.
CAS01	CLAIM ADJUSTMENT GROUP CODE	Valid values are PR - Patient Responsibility, PI - Payor Initiated reduction, CO - Contractual Obligation, CR - Corrections and Reversals, and OA - Other Adjustment
CAS02	CLAIM ADJUSTMENT REASON CODE	This field will be an exception code, adjustment reason code, or base rate change code, as appropriate.



HIPAA FIELD	HIPAA DESCRIPTION	MHN DESCRIPTION
CAS03	ADJUSTMENT AMOUNT	These are all the base rate changes (add-ons/cut-backs) that affect the payment of the claim at header level and at line level. The system will not allow for a zero dollar amount adjustment. Codes associated with zero dollar amounts will show a value of \$1. This amount will be removed from the value associated with subsequent codes. Per X12 standards, a negative amount <i>increases</i> the payment, a positive amount <i>decreases</i> the payment.
CAS04	ADJUSTMENT QUANTITY	Not used.
CAS05	CLAIM ADJUSTMENT REASON CODE	If needed, the second adjustment reason code
CAS06	ADJUSTMENT AMOUNT	If needed, the second adjustment amount
CAS07	ADJUSTMENT QUANTITY	Not used.
CAS08	CLAIM ADJUSTMENT REASON CODE	If needed, the third adjustment reason code
CAS09	ADJUSTMENT AMOUNT	If needed, the third adjustment amount
CAS10	ADJUSTMENT QUANTITY	Not used.
CAS11	CLAIM ADJUSTMENT REASON CODE	If needed, the fourth adjustment reason code
CAS12	ADJUSTMENT AMOUNT	If needed, the fourth adjustment amount
CAS13	ADJUSTMENT QUANTITY	Not used.
CAS14	CLAIM ADJUSTMENT REASON CODE	If needed, the fifth adjustment reason code
CAS15	ADJUSTMENT AMOUNT	If needed, the fifth adjustment amount
CAS16	ADJUSTMENT QUANTITY	Not used.
CAS17	CLAIM ADJUSTMENT REASON CODE	If needed, the sixth adjustment reason code
CAS18	ADJUSTMENT AMOUNT	If needed, the sixth adjustment amount
CAS19	ADJUSTMENT QUANTITY	Not used.